

ACIPC CREDENTIALLING PACKAGE

CREDENTIALLED INFECTION
CONTROL PROFESSIONAL
(PRIMARY, ADVANCED, EXPERT)

ACIPC CREDENTIALLING APPLICATION PACKAGE

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Australasian College for Infection Prevention and Control Ltd ACIPC, Level 6, 152 Macquarie Street 7000 TAS

Telephone: +61 3 6281 9239 Email: office@acipc.org.au Web: www.acipc.org.au ABN: 61 154 341 036

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INTRODUCTION TO CREDENTIALLING

Congratulations on applying to become an ACIPC Credentialled Infection Control Professional – CICP. This action demonstrates your commitment and dedication to your professional development. Credentialling is the establishment of a self-regulatory process instituted by the appropriate professional body to determine and acknowledge that an individual has demonstrated the prescribed competence for specialist practice.

Credentialling will:

- · Designate specialist or advanced expertise
- Inform consumers
- Establish a national standard
- Promote career advancement
- Identify a community of experts
- Contribute to qualifications for independent practice
- Enhance the quality of care provided
- Assist employers to manage risk.

For infection control professionals, credentialling provides a clear industry-recognised pathway whereby you can demonstrate the necessary knowledge, skills and attributes to be recognised by your peers as a Primary, Advanced or Expert Credentialled Infection Control Professional. All applications are reviewed by a panel of infection control professionals who have a wealth of knowledge and experience in a range of practice contexts. As a credentialled ICP, you are professionally committed to excellence in practice as evidenced by your willingness to undergo peer review. When awarded, the credential carries the imprimatur of the College as the peak professional body for infection prevention and control in Australasia.

For employers, credentialling helps you to meet current health regulations and health consumers' demand that the care provided by health professionals in your organisation is safe, effective and efficient. Inherent in establishing this culture of patient safety is the requirement to minimise the risk of healthcare-associated infection. The primary tenet underpinning all healthcare provision is that health professionals "first do no harm". The discipline of infection prevention and control comprises health professionals who are able to assess each practice context and healthcare interaction for potential infection risks, and apply evidence-based principles to recommend strategies to mitigate these risks. Furthermore, these professionals undertake a range of activities to evaluate the outcomes of these strategies and refine them as required.

As employers, you can and should expect that individuals seeking employment in infection prevention and control programs, or in roles that have a significant infection control component, have been credentialled by the peak professional body in infection prevention and control. Inclusion of an ACIPC credential as a requirement for employment will provide you with the confidence that your infection control professionals have a commitment to maintaining the necessary knowledge, experience and attributes to meet the challenges of contemporary healthcare. The requirement for re-credentialling every three years will ensure that staff maintain currency through ongoing professional development and peer review.

For health consumers, you have the right to expect and receive high quality and safe health care. You also have the right to be advised on the foreseeable risks of healthcare-associated infection and to be informed of, and consent to, strategies to mitigate these risks. As a consumer, you can have confidence that this is the case when receiving care from a facility or service where the infection control program is led and staffed by ICP who are credentialled by the Australasian College for Infection Prevention and Control.

LEVELS OF CREDENTIALLING

There are 3 levels of ACIPC Credentialling available to infection control professionals:

PRIMARY CICP

The Primary CICP demonstrates the knowledge, attributes and behaviours in infection control at a basic level. They have participatory responsibility for infection control in their setting. They defer to the expertise of an Advanced or Expert ICP and/or fulfil some infection control responsibility in accordance with specific legislation and standards of practice. This may include hand hygiene auditing, acting as a link nurse, or a person who is involved in reprocessing reusable equipment. It is expected that they will routinely practice in accordance with relevant guidelines and the best available evidence, and actively seek the advice of Advanced and Expert CICPs in applying core principles to new, unfamiliar or challenging circumstances.

ADVANCED CICP

The Advanced CICP demonstrates the knowledge, attributes and behaviours in infection control at an advanced level. They have leadership responsibility for one or more elements of an infection control program in their setting.



They would defer to an Expert ICP for guidance and oversight in co-ordinating an entire program. It is expected that they will act as role models to Primary ICPs and practise in accordance with relevant guidelines and the best available evidence, and actively seek the advice of Expert CICPs in applying core principles to new, unfamiliar or challenging circumstances.

EXPERT CICP

The Expert CICP demonstrates the knowledge, attributes and behaviours at an expert level. They plan, implement, review and evaluate comprehensive infection control programs. They take a leadership role in terms of research and knowledge generation and contribute to the evolution of the discipline of infection control. They act as role model and mentor to Primary and Advanced ICPs and in accordance with relevant guidelines and the best available evidence, and work collaboratively with other Expert CICPs in applying core principles to challenging circumstances and generating new evidence for practice.

ELIGIBILITY

Applicants should consider the various requirements for each level in order to determine the level of credential that is most applicable to their individual situation. To apply for and maintain ACIPC credentialling you will need to meet relevant criteria across 5 prescribed domains. These are detailed in Table 1:

- 1. Relevant Vocation: Applicants must identify as belonging to an eligible vocation for the particular level of credentialling. Based on the specific level of credentialing for which you are applying and if you practice as a registered clinician you may be required to hold an unrestricted licence as Registered Nurse or Registered Medical Practitioner with the Australian Health Practitioner Regulatory Authority, the Medical Council of New Zealand or the Nursing Council of New Zealand or the relevant agency in the country in which you practice.
- 2. Prerequisites: Applicants must be a current financial member of ACIPC and be working within their Relevant Vocation based on the level of credentialling. Applicants must meet the experience requirements of the relevant level of credential for which you are applying by being currently employed (full or part-time) or self-employed in a role that is designated as an infection prevention and control role or includes a specific element of infection control such as hand hygiene auditing, infection control

link nurse or reprocessing reusable equipment part-time. This should be demonstrated in your curriculum vitae.

- 3. Knowledge Requirements: There are specific formal educational requirements for all levels of credentialling. Primary CICPs must complete the ACIPC Foundations of Infection Prevention and Control Course or equivalent as approved by ACIPC, and the Advanced CICP and Expert CICP credentials include requirements for formal specialist tertiary qualifications in infection control. Tertiary qualifications achieved at international institutions will be considered to meet these requirements if they are named and are consistent with the relevant Australian Qualification Framework (AQF) level.
- **4. Attitudinal Requirements:** Applicants are required to undergo Peer Review and tender a Critical Reflective Narrative Submission in accordance with requirements of the level of credentialling.
- 5. Practice Requirements: Applicants are required to submit a curriculum vitae that provides a comprehensive summary of specific information as set out in this guide and submit a Professional Portfolio Submission in accordance with requirements of the level of credentialling. In doing so applicants must demonstrate to the satisfaction of the ACIPC Professional and Credentialling Standards (PACS) Committee that you have achieved competency in prescribed areas of practice, engage in reflective practice and demonstrate commitment to ongoing professional development. This will be demonstrated in the reflective narrative(s) you provide.

If the application is successful the credential is awarded for three years after which the individual must either apply for recredentialling at the same level, or apply to be credentialed at a higher level assuming that they have completed the necessary education and experience to meet the requirements of the next credentialling level.

RELEVANT VOCATIONS

PREREQUISITES

KNOWLEDGE REQUIREMENTS

Primary Re-Credentialled Infection Control Professional (CICP – P)

Nurses, Doctors, Scientists, Dentists, Epidemiologists, Veterinarians, Allied Health Professionals. Public Health and **Environmental Health** Professionals, Child Care Workers, Pharmacists, Occupational Health Industry Representatives. Midwives. Ambulance Paramedics, Defence Health Workers. Personal Care Professionals (tattooists, hairdressers, piercers etc.), Funeral Attendants, others on a case-by-case.

- Current financial membership of ACIPC
- Working >12 months part time in infection prevention and control where an aspect of infection control was an explicit focus of your role.
- Complete ACIPC Foundations of Infection Prevention and Control Course, or equivalent as approved by the ACIPC
- Complete ACSQHC Infection Control modules
- Complete one of the Hand Hygiene Australia modules

Advanced Re-Credentialled Infection Control Professional (CICP - A) Registered Nurses, Doctors, Scientists, Epidemiologists, Dentists, Veterinarians, Pharmacists, Midwives, Ambulance Paramedics, others on a case-by-case.

- Current financial membership of ACIPC
- Working >3 years
 part time in infection
 prevention and control
 where an aspect of
 infection control was
 a major focus of your
 role.

Complete AQF 8 Graduate Certificate in Infection Prevention and Control as approved by the ACIPC.

Expert Re-Credentialled Infection Control Professional (CICP - E) Registered Nurses, Doctors, Midwives, Ambulance Paramedics, others on a case-by-case.

- Current financial membership of ACIPC
- Working >5 years
 part time in infection
 prevention and control
 where an aspect of
 infection control was
 the primary purpose of
 your role.

Complete AQF 9 Master of Infection Prevention and Control (or higher doctoral qualification) as approved by the ACIPC.



ATTITUDINAL REQUIREMENTS

- · Peer review
- Critical Reflective Narrative submission on your role over the last twelve (12) months of your work and your professional development plan for the next three (3) years,

- Peer review
- Critical Reflective Narrative submission comprising three (3) narratives: one on your role including how it relates to, or supports, your local infection control program; and two (2) from the following:
 - A specific outbreak situation, or
 - Infection control quality improvement activity, or
 - Infection control policy/procedure development implementation/review, or
 - Education project.

PRACTICE REQUIREMENTS

- Curriculum vitae
- Portfolio submission describing one of the following:
 - a) A specific outbreak situation, or
 - b) Infection control quality improvement activity, or
 - c) Infection control policy/procedure/ development/implementation/review, or
 - d) Based on your role in infection prevention and control including a critical reflective narrative on your perceptions of the skills and knowledge a person at an advanced level would demonstrate in the situation and what you would need to do to develop the same level of knowledge and skills.
- Employment in IPC Role:
 Applicants must include a Statement of Service from their current employer OR a certified Statutory Declaration outlining their current position in IPC.

- Curriculum vitae
- Giving Back Portfolio Describe how you contribute to the profession (e.g. sitting on a committee, research, presenting at conferences), including a reflection identifying where your expertise lies.
- Employment in IPC Role:
 Applicants must include a Statement of Service from their current employer OR a certified Statutory Declaration outlining their current position in IPC.

- Peer review
- Critical Reflective Narrative submission comprising three (3) narratives:
 - Role,
 - Knowledge generation,
 - Infection control evolution.

- Curriculum vitae
- Giving Back Portfolio Describe how you contribute to the profession (e.g. sitting on a committee, research, presenting at conferences), including a reflection maintaining yourself as an expert.
- Employment in IPC Role:
 Applicants must include a Statement of Service
 from their current employer OR a certified Statutory
 Declaration outlining their current position in IPC.

ASSESSMENT PROCEDURES

- The ACIPC Professional and Credentialling Standards (PACS) will be responsible for assessing applications. The applicant will be identified to the Committee during the credentialling process.
- The ACIPC PACS Committee formally assesses all applications in accordance with the criteria outlined in this document and makes a recommendation to the ACIPC Board of Directors as to whether the applicant meets the requirements for credentialing. The credential can only be awarded on the basis of the evidence supplied by the applicant. Should any PACS Committee members require clarification of a point from the applicant's peer reviewer they will notify the Committee Chair so that all points requiring clarification are addressed during one contact with the peer reviewer.
- The final decision to award the credential will be made by the ACIPC Board of Directors based on the recommendations from the Chair of the PACS Committee.
- The credential is awarded for a period of three years after which the individual must either apply for recredentialling or apply to be credentialled at a higher level.

APPLICATION ADVICE

- When compiling your submission please refer to the information given in Part 2 - Application Forms to ensure all criteria are met for each section.
- A checklist is provided in Part 2 Form 6 to ensure you have included all the required information.
- Ensure that you observe the maximum word counts for relevant sections.
- All applications must be submitted electronically to the ACIPC Secretariat via the application portal on the ACIPC website

Certified copies of qualifications and current

practising certificate (as relevant) must be mailed to *ACIPC, Level 6, 152 Macquarie Street, Hobart, TAS 7000.*Certified copies can be provided as a photocopy of the original documents sighted and signed by a Justice of the Peace, Commissioner of Declarations, Notary Public or other authorised official. Please note that the certification must be placed on the printed side of the documents, not the reverse side.

APPLICATION FEES AND PAYMENTS

The ACIPC Board of Directors sets the costs associated with applications for credentialling. For information regarding the current application fees and payment schedule plfase refer to the Credentialling Section of the ACIPC website: www.acipc.org.au

SUCCESSFUL APPLICATIONS

- A certificate will be emailed to you and you will be entitled to use the post-nominal associated with the credential awarded: CICP-P, CICP-A, or CICP-E for three (3) years.
- A public database of Credentialled Infection Control professionals (CICP) is maintained by ACIPC on the website. Credentialled Infection Control professionals will be profiled in various ACIPC communications. Names are removed from the database at the end of the three year period of the credential unless the individual has been recredentialled or credentialled at a higher level.

UNSUCCESSFUL APPLICATIONS

An initial application for credentialing may be unsuccessful for two reasons:

- 1. The application requires clarification and resubmission or the revised application is not submitted within a specified time frame. The ACIPC PACS Committee may seek clarification from you regarding one or more aspects of your application. The PACS Committee Chair will notify you in writing if components of your application require clarification. The correspondence will provide feedback detailing the areas of deficit and suggestions for how the application can be improved. You will be required to submit a response and/or revisions within a stated timeframe. If a revised application is not submitted within this timeframe the application will formally lapse and be deemed unsuccessful.
- 2. The application is deemed unsuccessful. If the PACS Committee has assessed that the application has not met the requirements for credentialing, the Chair will notify the applicant in writing. The correspondence will provide constructive feedback detailing the areas of deficit. If you wish to resubmit a full application within twelve (12) months there will be a resubmission cost. If you wish to appeal the decision, follow the appeal process outlined below.



PROCEDURES FOR APPEAL

Unsuccessful applicants are encouraged to review and reflect on the comments provided by the ACIPC PACS Committee along with their application before commencing an appeal. Applicants may initiate discussion with the PACS Committee Chair, or their delegate, to seek clarification which may aid in understanding why the application was unsuccessful. Such discussions usually provide answers to any questions and resolution to any concerns an applicant may have.

Applicants have grounds for appealing the decision of ACIPC to not award a credential if they can demonstrate that:

- (a) the process for reviewing the application (as outlined in the marking guidelines) was not correctly followed, or
- (b) the applicant is able to provide information indicating that not all the evidence was in line with the application guidelines was considered in the marking process.

In the event that an unsuccessful applicant disagrees with ACIPC's decision not to credential, the following process must be followed:

- An appeal must be lodged with supporting evidence to the ACIPC President via the ACIPC Secretariat within fourteen (14) working days of receiving written feedback from ACIPC outlining why the credential was not awarded provided by the ACIPC PACS Committee Chairperson.
- The ACIPC President shall acknowledge receipt of the appeal in writing, and request relevant documentation from the Chairperson of the ACIPC PACS Committee including the original (unmarked) copy of the application, and any other documents or correspondence with the applicant.
- 3. The ACIPC President shall convene an Appeal Tribunal comprising four (4) members of the ACIPC Board and the members of the PACS Committee to hear the appeal. This meeting (by teleconference) shall be convened as soon as possible.
- 4. If the tribunal finds that the appeal does not meet the grounds for appeal the applicant's objection will be denied and the earlier decision will be upheld.
- If the tribunal finds that the applicant's appeal is in accordance with the grounds for appeal the objection will be upheld and the applicant will be invited to resubmit their application to ACIPC at no additional cost.
- 6. If the applicant is again unsuccessful the applicant and the ACIPC Board will be notified of the decision in writing.
- The decision of the Appeals Tribunal is final.
- The applicant will have only one opportunity for appeal. If the applicant is unsuccessful following appeal, the credential will not be awarded and the applicant will be excluded from submitting a new application for a period of twelve (12) months.

RECREDENTIALLING

The credential is valid for three (3) years. Towards the end of the third year of your credential you will be sent an invitation to apply for recredentialling. A recredentialling application package will be provided and the fees associated with the process available on the College website. Credentials that lapse more than three (3) months past the due date and the holder will be required to undertake a new credentialing application process. Please refer to the ACIPC Recredentialling Application Package. CICPs originally credentialled at Primary or Advanced level may choose to apply for a higher level of credential when the terms of their original credential expires. These CICPs should use the ACIPC Credentialling Application Package to apply for the higher level credential.

SUBMISSION GUIDELINES

The following information provides advice regarding evidence that is required for the various prescribed domains of the credentialling standard.

RELEVANT VOCATION

Applicants must provide documentary evidence of their professional standing within an eligible Relevant Vocation for the particular level of credentialling. Based on the specific level of credentialing for which you are applying and if you practice as a registered clinician you may be required to hold an unrestricted licence as Registered Nurse or Registered Medical Practitioner with the Australian Health Practitioner Regulatory Authority, the Medical Council of New Zealand or the Nursing Council of New Zealand or the relevant agency in the country in which you practice. For more information, please contact the PACS Committee.

PREREQUISITES

- Applicants must be currently financial members of ACIPC to be eligible to apply. The College Secretariat will provide evidence on this to the PACS Committee on receipt of your application.
- Applicants must provide documentary evidence of their employment and experience requirements of the relevant level of credential for which they are applying by being currently employed (full or parttime) or self-employed in a role that is designated as an infection and prevention role or includes a specific element of infection control such as hand hygiene auditing, infection control link nurse or reprocessing reusable equipment part-time. Suitable documentation includes statements of service, official letters from supervisors or employers and other similar documentation attesting to this requirement. This information should be consistent with the curriculum vitae.

KNOWLEDGE REQUIREMENTS

Applicants must provide evidence of completion of the prescribed education relevant to the specific credentialing level for which they are applying as outlined in Table 1. Certified copies of certificates and qualifications must be submitted.

ATTITUDINAL REQUIREMENTS - PEER REVIEW

The purpose of this peer review is to provide support for your application to be credentialed. Specifically the peer reviewer will be asked to provide comment on your professional and ethical practice and interpersonal skills by addressing a number of points relevant to the credential for which you are applying. The applicant must identify a suitable peer reviewer as per the essential criteria described below, and request a confidential peer review be provided directly to the ACIPC PACS Committee via the ACIPC Secretariat. The peer reviewer is a professional colleague who meets the following criteria:

- Has known the applicant in a professional capacity for a minimum period of six (6) months;
- Has worked closely with the applicant as a peer or as a supervisor, or in the case of the selfemployed ICP, the reviewer may be a client who has contracted the services of the ICP;
- Agrees to handle all information associated with this application in confidence; and,
- Is willing to be contacted by the ACIPC PACS Committee should clarification be necessary in relation to any information provided in the application.

ATTITUDINAL REQUIREMENTS - CRITICAL REFLECTIVE NARRATIVE SUBMISSION

Reflective practice allows the individual to process their professional experiences and explore their understanding of what they are doing, why they are doing it and the impact it has on themselves and others. It is a crucial professional activity intrinsic to learning¹, will stimulate self-awareness and personal growth² and is a critical skill for effective functioning in complex practice situations³. For these reasons the ACIPC credentialling process places significant emphasis on reflection as part of the assessment criteria.

How to write a critical reflective narrative As a general guide each reflective narrative must:

- Be between 500-1500 words long
- Be written in the first person

In your narrative, answer the following key questions:

- What was the situation?
- What happened in the situation?
- · How did you go about it?
- Why did you go about it that way?
- · What was the outcome?
- What did you do well?
- What could you have done better?
- What would you do differently next time?
- What other steps would you take as a result of this reflection?

Describe your actions, thoughts, feelings and observations experienced during the episode. The narrative should include a description of what went well during the episode and why you thought so; a description of what did not go well (i.e. the challenges and barriers you encountered); and why you thought the strategies you had put into place were not successful. Review behaviours, interactions, feelings and thoughts that you identified throughout the event/ activity and consider strategies that may have altered the outcomes. Identify your strengths and limitations. Outline learning objectives from your limitations that identify a skill to be practiced or knowledge to be gained and how you plan to achieve this. Support your narrative with evidence relevant to the chosen activity (copies of peer reviewed publications, conference presentations, education activities, committee activity, other activities).

There are specific reflective submission requirements for each level of credential and they are described below.

CICP-PRIMARY

The applicant must provide a reflective review of their infection control role over the past twelve (12) months and address the following:

- 1. Describe the greatest challenge(s) you have faced in your role in this time.
- 2. What did you learn about yourself while responding to the challenge(s)?
- 3. In terms of your response what do you think you did well?
- 4. What would you do differently in similar circumstances?
- 5. Outline your professional development plan for the next three years and identify how your experience over the last twelve (12) months has influenced your plan.

CICP-ADVANCED

The applicant must provide three (3) reflective submissions in total. Each should contain a maximum of 1500 words. The first critical reflection is prescribed as follows:

 A description of your infection control role and how it relates to and/or supports the rest of the program. Include in this reflection your



perception about the way you interact with other members of the IP&C team and other members of the organisation outside the team. Identify the skills, knowledge and attributes critical to success in your role and your strengths and weaknesses in relation to them. What professional development activities have you planned to address your weaknesses?

The remaining two (2) must be chosen from the following options:

- A detailed description of a specific outbreak situation you have managed or been involved in managing including: a critical review of the scientific literature; the process used for data collection; measures taken to contain the outbreak; actual or potential legal and/or ethical issues associated with the outbreak; a reflective commentary on your professional development and learning progress as a result of your role in this event.
- 2. A detailed report on a quality improvement activity you have implemented in your infection prevention and control capacity. The report should include: the aim of the quality improvement activity; how the activity was identified as necessary; the methods used to develop and implement the activity; the results/outcome of the project; an evaluation of the activity including any feedback received, and a reflective commentary on the lessons you learned through conducting this activity.
- 3. A detailed description of an IC policy/procedure you have developed and implemented within your workplace including: the scope and intent of the policy/procedure; the literature review/evidence base underpinning the policy/procedure; how you set about implementing the policy/procedure; how you evaluated the success/compliance with the policy/procedure; and a commentary on the lessons you learned through the process.
- 4. A detailed account of an educational program/ project (e.g. health promotion or staff/patient teaching) you have implemented including: the background to the program/project; the objectives; the design of the including intended audience, relevance of topic, learning principles; implementation and teaching methods; how the program was evaluated and the results of the evaluation. Include any examples of education materials/teaching aids developed in conjunction with the project; and a commentary on the lessons you learned through the process.

CICP-EXPERT

The applicant must provide three (3) reflective submissions as prescribed below. Each should contain a maximum of 1500 words.

A critical review of your role in infection prevention and control over the past three (3) years, the major challenges you have faced in

- the role in that time, the professional strengths and weaknesses identified as you responded to the challenges, the steps you have taken to address your weaknesses, and the lessons you would take from this experience and use when mentoring ICP with less experience.
- 2. A critical narrative review of your activities over the past three (3) years in relation to infection prevention and control knowledge generation. Include the reason you identified this specific area of need, what you hoped to achieve by undertaking the activities and how you evaluated your success. In retrospect what would you do differently and why?
- 3. A detailed account of how your infection prevention and control program has evolved over the past three (3) years including the role of political, economic and cultural imperatives on this evolution. To what extent do you feel you planned and directed the evolution? Identify your perception of the next major challenge for IP&C programs and what action you have taken or are taking to prepare.

PRACTICE REQUIREMENTS -**CURRICULUM VITAE**

The prescribed format for your curriculum vitae is provided below. Please ensure any documents pertaining to qualifications and/or professional registration are certified as true copies by a Justice of the Peace, Commissioner of Declarations, Notary Public or other authorised official. Please note that the certification must be placed on the printed side of the documents, not the reverse side.

Professional Qualifications:

List in reverse chronological order (most recent first) all relevant qualifications, including tertiary courses and certificates. Include current studies and planned year of completion. Use the marking guide in Part 2 of this package to assist in identifying the information required.

Awards:

List any awards or grants you have received and include certified copies of the awards/grants.

Employment History:

List in reverse chronological order, all relevant professional experience commencing with your current employer and referees to enable verification by ACIPC. Use the marking guide in Part 2 of this package to identify the amount of experience required for the specific credential level and ensure this is demonstrated in this section of your CV.

Continuing Education:

List all relevant continuing education programs you have attended over the past three (3) years e.g. short courses, workshops, seminars and conferences.

Professional Activities:

Provide a description of all professional activities in which you have been involved over the past three (3) years. Your description should include your level of involvement and the duration of your involvement at this level. The ACIPC Infection Control Practice will assist you in ensuring you include relevant professional activities.

Education and Research:

List and provide a brief description of your participation in any significant/relevant education and/or research endeavours over the past three (3) years. List all publications using a standard referencing format.

Quality Improvement Activities:

Provide a brief description of any quality improvement activities you have implemented in your infection prevention and control role in the past three (3) years.

Other Activities:

List any other activities or achievements over the past three (3) years that you believe will support your application.

PRACTICE REQUIREMENTS - PORTFOLIO

There are specific practice requirements for each level of redential and they are described below.

CICP-PRIMARY

Prepare a reflective narrative on one of the topics listed and provide a detailed description of the event including your role and reflect on a colleague/supervisor working at a more advanced level and identify the skills and/or knowledge they demonstrated when managing the issue. Compare and contrast these attributes with your own and identify what specific skill or knowledge your would most like to develop and what strategies you can implement to develop the skill/knowledge. Identify whether and to what extent the colleague you identified previously would be able and/or willing to assist/support you in this endeavour.

Topic options include:

- (a) A specific outbreak situation, or
- (b) Infection control quality improvement activity, or
- (c) Infection control policy/procedure development/ implementation/review, or
- (d) Based on your role in infection prevention and control including a critical reflective narrative on your perceptions of the skills and knowledge a person at an advanced level would demonstrate in the situation and what you would need to do to develop the same level of knowledge and skills.

CICP-ADVANCED

Giving Back Portfolio - The portfolio submission required for this level of credential relates to contributing to the profession of infection prevention and control. Describe how you contribute to the profession (e.g. committee membership, research, presenting at conferences), including a reflection identifying where your expertise lies. The account should include reflection that specifically identifies your emerging area(s) of expertise.

CICP - EXPERT

Giving Back Portfolio - The portfolio submission for the expert CICP also relates to contributing to the profession of infection prevention and control. Describe how you contribute to the profession (e.g. sitting on a committee, research, presenting at conferences), including a reflection on maintaining yourself as an expert.

- ¹ Levett-Jones, T.L (2007). Facilitating reflective practice and self-assessment of competence through the use of narratives. Nurse Education in Practice, 7(2): 112-119
- ² Canniford, L.J., Fox-Young, S. (2015). Learning and assessing competence in reflective practice: Student evaluation of the relative value of aspects of an integrated, interactive reflective practice syllabus Collegian, 22(3): 291-297
- ³ Freshwater, D., Stickley, T. (2004). The heart of the art: emotionalintelligence in nurse education. Nursing Inquiry, 11(2): 91-98.

Employment in IPC Role

It is a requirement for all applicants to be currently working in IPC. Please include with your application either a Statement of Service from your current employer OR a certified Statutory Declaration outlining your current position in IPC.

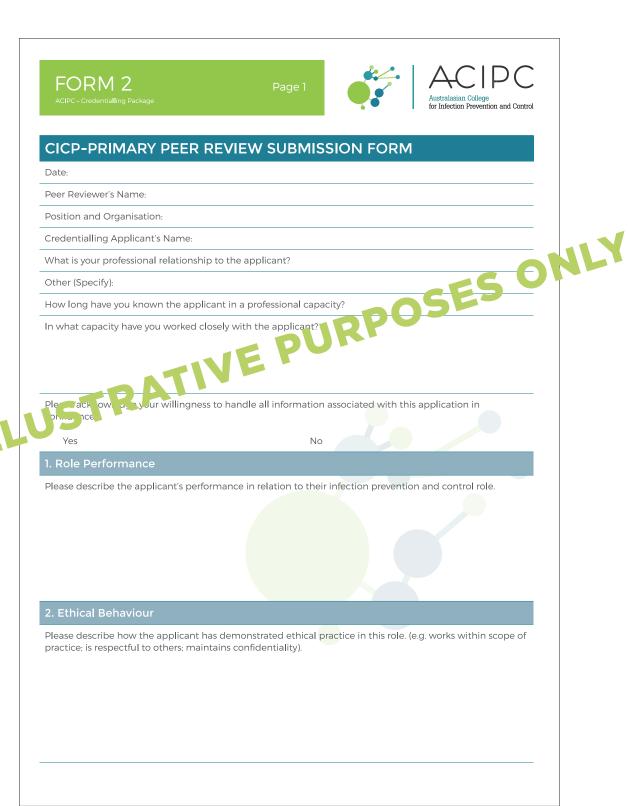


PART 2

Applicant Forms

The forms that follow are for illustrative purposes only.

When making an application please download the relevant respective PDF fillable forms from the College website at: www.acipc.org.au





FORM 2



CICP-PRIMARY PEER REVIEW SUBMISSION FORM continued ...

Please outline how the applicant has demonstrated commitment to their own ongoing professional development in this role.

POSES ONLY Jersonal s Please describe the interpersonal skills the polican has demonstrated while performing this role.

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TO SUBMIT YOUR COMPLETED FORM:
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PART 2 Applicant Forms

FORM 3	Page 1	Australa	CIP C
ACIPC - Credentialling Package		for Infec	tion Prevention and Cont
CICP-PRIMARY MARKIN	IG GUIDE		
Date:			
Name of Applicant:			
Name of Assessor:	Lead Assessor	3:	
Conflict of interest with applicant?		O Yes	O No
Details of conflict of interest:		-05	ES (
Curriculum Vitae	_ 4 1 1		
Demonstrates current employment i and control is an explicit focus of at minimum of 12 months parameter		ention	O Not met
Demonstrates on le If the follo	wing education (certified copies	provided):	
Acros Foundations in IP&C Course		O Met	O Not met
ACSQHC IP&C modules		O Met	O Not met
HHA learning package		O Met	O Not met
Employment in IPC Role			
Applicants must include a Statement employer OR a certified Statutory Dec position in IPC.		O Met	O Not met
Peer Review			
Peer review confirms:			
Appropriate role performance		O Met	O Not met
Ethical behaviour		O Met	O Not met
Commitment to ongoing profession	onal development	O Met	O Not met
Appropriate interpersonal skills		O Met	O Not met
Reflective Submissions			
Infection control role over past 12 mor	nths:		
Applicant describes the challenges	s of the role in this time	O Met	O Not met
Applicant describes lessons learne	d as a result	O Met	O Not met



Applicant identifies what they did well	O Met	O Not met
Applicant identifies what they would do differently in future	O Met	O Not met
Applicant outlines PD plan for next 12 months and identifies how the past 12 months has influenced the plan.	O Met	O Not met
Portfolio Submission		
applicant provides a reflective narrative on ONE of the topics listed (outbre mprovement activity, IC policy/procedure development and implementation) addressing the following elements: Applicant provides a detailed description of the event including their contents.	tion or an educat	ion or gram or
Applicant reflects on the role of an advanced college, up 1/2 involved in the event and the skills/knowledge delegated when managing the issue	O Met	O Not met
Based on a comparing of heir white with that of the colleague, the applicant ic into pecific developmental needs and strategies to critate devicement including the support of the colleague	O Met	O Not met
ssessors Notes:		
CICP-Primary Credentialling recommended?	O Yes	O No
der Filmary credentialling recommended:		_





FORM 4	
CIPC - Credentialling Package	

ACIPC

CES ONLY

CICP-ADVANCED PEER REVIEW SUBMISSION FORM continued ...

iii. How has the applicant demonstrated an understanding of, and personal commitment to, ethical practice during their committee participation?

Page 2

i. How has the applicant demonstrated their knowledge of staff health issues?

ustra ii. Describe the applicant's level of involvement in the management of staff health issues.

3. Outbreak or Critical Incident Management

i. How has the applicant demonstrated their knowledge within the context of the incident?







CICP-ADVANCED PEER REVIEW SUBMISSION FORM continued ...

ii. Describe the applicant's level of involvement in the management of the outbreak/critical incident.

iii. Describe the interpersonal skills and ethical practice demonstrated by the applicant in the management of issues that arose from the incident.

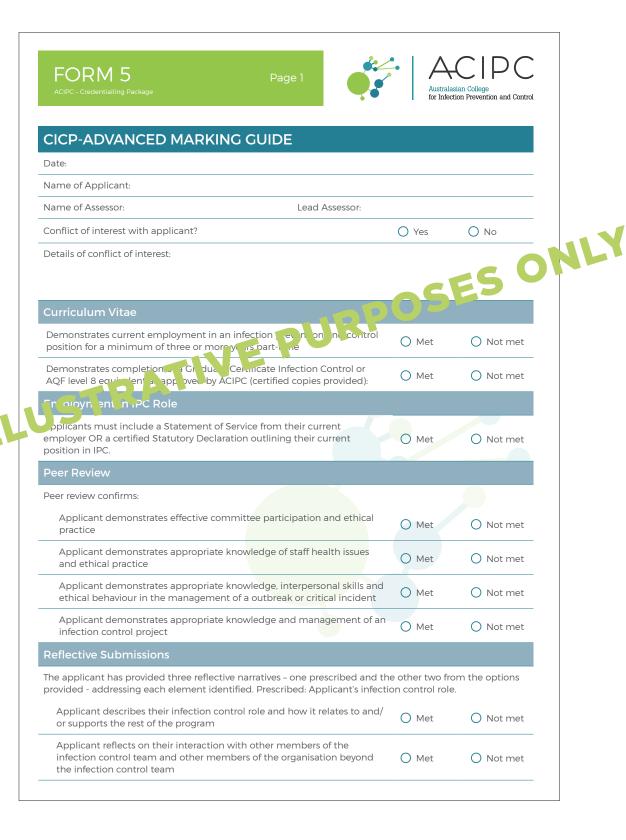
4. Project Management/Education Program

i. Describe the applicant's experience and demonstrated skills in managing a specific infection prevention and control project.

ii. Describe how the applicant demonstrated knowledge of, and a commitment to ethical practice during the project management.

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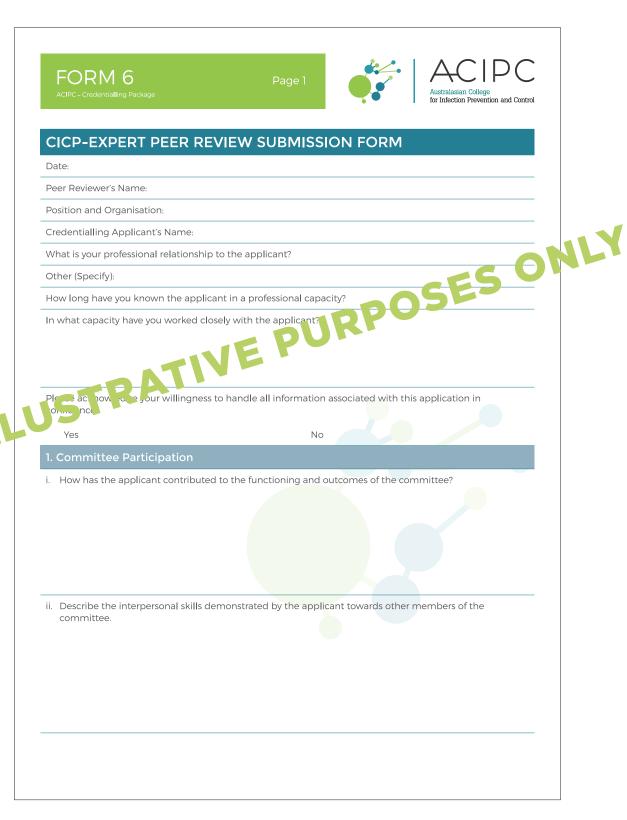


PART 2 Applicant Forms

FORM 5 ACIPC - Credentialling Package	Australe for Infec	asian College ction Prevention and Cont
CP-ADVANCED MARKING GUIDE continued		
Applicant identifies the skills, knowledge and attributes critical to success in their role and their strengths and weaknesses in relation to them	O Met	O Not met
Applicant identifies the professional development activities planned to address identified weaknesses	O Met	O Not met
ption 1: Specific Outbreak Situation		
Applicant provides a detailed description of a specific outbreak situation in which they have been involved	O Met	O Not met
Applicant provides a critical review of the scientific literature around the topic	O_Me	No met
Applicant describes the processes used for data collection	Met	O Not met
Applicant describes the measures taken to antain the or beak	O Met	O Not met
Applicant describes actual to the tial to gall confor ethical considerations associated with the core	O Met	O Not met
A clical iproves a reflective commentary on their professional component and learning progress as a result of their role in the event	O Met	O Not met
otion 2: Quality Improvement Activity		
oplicant provides a detailed report on a quality improvement activity they	nave implemer	nted including:
The aim of the activity	O Met	O Not met
How the activity was identified as necessary	O Met	O Not met
Methods used to develop and implement the activity	O Met	O Not met
Results/outcomes of the project	O Met	O Not met
Evaluation of the activity including any feedback	O Met	O Not met
A reflective commentary on lessons learned through conducting the activity	O Met	O Not met
otion 3: Infection Control Policy/Procedure Development and	Implement	ation
oplicant provides a detailed description of an infection control policy/procenplemented including:	edure they hav	e developed and
Scope and intent of the policy/procedure	O Met	O Not met
Literature review or evidence based underpinning the policy/procedure	O Met	O Not met
How the policy/procedure was implemented	O Met	O Not met



ICP-ADVANCED MARKING GUIDE continued		
How success/compliance with the policy/procedure was evaluated	O Met	O Not met
A reflective commentary on lessons learned through the process	O Met	O Not met
ption 4: Education Program/Project		
Applicant provides a detailed account of an educational program/project ncluding:	they have impler	mented
Background to the program/project	O Met	O tot me
Program objectives	SME	O t met
Program design including target audience, topic relevance and to in principles	Met	O Not met
Implementation and teaching methods	O Met	O Not met
Program evaluation thean, and esums	O Met	O Not met
Fig.mpi, s of ye hing materials provided	O Met	O Not met
A reflective commentary on lessons learned through the process	O Met	O Not met
ortfolio Submission		
applicant provides a reflective narrative describing how they have contribute or control in the past three (3) years.	uted to the profe	ession of infection
Applicant describes a range of appropriate activities demonstrating contribution to the profession	O Met	O Not met
Applicant uses these activities to demonstrate their specific area(s) of infection prevention and control expertise	O Met	O Not met
ssessors Notes:		
ICP-Advanced Credentialling recommended?	O Yes	O No
efer to full Committee?	O Yes	O No











SES ONLY

CICP-EXPERT PEER REVIEW SUBMISSION FORM continued ...

iii. How has the applicant demonstrated an understanding of, and personal commitment to, ethical practice during their committee participation?

LL USTRATIVE i. How has the applicant demonstrated their knowledge of stand

ii. Describe the applicant's level of involvement in the management of staff health issues.

3. Outbreak or Critical Incident Management

i. How has the applicant demonstrated their knowledge within the context of the incident?







CICP-EXPERT PEER REVIEW SUBMISSION FORM continued ...

ii. Describe the applicant's level of involvement in the management of the outbreak/critical incident.

iii. Describe the interpersonal skills and ethical practice demonstrated by the application to a many ement of issues that arose from the incident. TRATIVE PURP

. Project Management/Education Program

i. Describe the applicant's experience and demonstrated skills in managing a specific infection prevention and control project.

ii. Describe how the applicant demonstrated knowledge of, and a commitment to ethical practice during the project management.

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FORM 7 Page 1	A	CIPC
ACIPC - Credentialling Package		asian College ction Prevention and Contro
CICP-EXPERT MARKING GUIDE		
Date:		
Name of Applicant:		
Name of Assessor: Lead Assessor:		
Conflict of interest with applicant?	O Yes	O No
Details of conflict of interest:		
Curriculum Vitae	_1	26
Demonstrates current employment in an infection prevention and control position for a minimum of five or more years full-time equivalent	Met	O Not met
Demonstrates completion of a Masters Infection Control of At Fill ver 9 equivalent or PhD as approved by ACIP (Control of oles provided):	O Met	O Not met
Employment in IPC Rui		
Application must cluse a statement of Service from their current in their current per to R a certified Statutory Declaration outlining their current is still a lin IPC.	O Met	O Not met
Peer Review		
Peer review confirms:		
Applicant demonstrates effective committee participation and ethical practice	O Met	O Not met
Applicant demonstrates appropriate knowledge of staff health issues and ethical practice	O Met	O Not met
Applicant demonstrates appropriate knowledge, interpersonal skills and ethical behaviour in the management of a outbreak or critical incident	O Met	O Not met
Applicant demonstrates appropriate knowledge and management of a infection control project	n O Met	O Not met
Reflective Submissions		
Applicant has provided three reflective narratives as prescribed and addres detailed below.	sed each of the	elements as
Narrative 1: A Critical Review of your Role		
Applicant has provided a critical review of their role in infection prevention and control over the past three (3) years	O Met	O Not met
Applicant describes the major challenge(s) of the role	O Met	O Not met
Applicant identifies their professional strengths and weaknesses	O Met	O Not met

PART 2 Applicant Forms

Applicant identifies the lessons from this experience that could be used as instructive when mentoring less experienced ICP arrative 2: Description of Activities Relating to Knowledge Gener Applicant provides a detailed description of activities relating to infection prevention and control knowledge generation in past three (3) years Applicant identifies how the specific area of need was identified Applicant identifies what they hoped to achieved as a result of the activities Applicant identifies what they would do differently and who arrative 3: Evolution of the Infection Fixed Fixe	ICP O Me Ing to Knowledge Generation Vities relating to infection In past three (3) years O Me Id was identified O Me Ited Me			
as instructive when mentoring less experienced ICP arrative 2: Description of Activities Relating to Knowledge Gener Applicant provides a detailed description of activities relating to infection prevention and control knowledge generation in past three (3) years Applicant identifies how the specific area of need was identified Applicant identifies what they hoped to achieved as a result of the activities Applicant identifies how the success was evaluated Applicant identifies what they would do differently and what arrative 3: Evolution of the Infection 5: eve 1: n	ICP O Me Ing to Knowledge Generation Vities relating to infection In past three (3) years O Me Id was identified O Me Ited Me	ICP-EXPERT MARKING GUIDE continued		
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Applicant identifies how the specific area of need was identified Applicant identifies what they hoped to achieved as a result of the activities Applicant identifies what they hoped to achieved as a result of the activities Applicant identifies how the success was evaluated Applicant identifies what they would do differently and who larrative 3: Evolution of the Infection 5: eve to not control Program has a plye ove the past three (3) years including the role of particular, action of and cultural imperatives Cicar describes the extent to which they directed the evolution Applicant identifies their perception of the next major challenge for infection prevention and control programs including action taken to prepare for the challenge Portfolio Submission Applicant provides a reflective narrative describing how they have	n past three (3) years ed was identified as a result of the activities Me ted mtly and why Control Program we infection prevention where (3) years including rected the evolution major challenge for iding action taken to Me mg how they have mities demonstrating Me Me Me Me Me Me Me Me Me M	larrative 2: Description of Activities Relating to Knowledge Gen	eration	
Applicant identifies what they hoped to achieved as a result of the activities Applicant identifies how the success was evaluated Applicant identifies what they would do differently and what Jarrative 3: Evolution of the Infection 5: eve (*) in a Control Programment of the Infection prevention and control programmas englished by the past three (3) years including the role of price and cultural imperatives Circan describes the extent to which they directed the evolution Applicant identifies their perception of the next major challenge for infection prevention and control programs including action taken to prepare for the challenge Portfolio Submission Applicant provides a reflective narrative describing how they have	as a result of the activities		O Met	O Not met
Applicant identifies how the success was evaluated Applicant identifies what they would do differently and who Jarrative 3: Evolution of the Infection Sieve Film of Control Program Applicant provides a detailed a composite the infection prevention and control program has a blue over the past three (3) years including the role of formal, become and cultural imperatives Fican describes the extent to which they directed the evolution Applicant identifies their perception of the next major challenge for infection prevention and control programs including action taken to prepare for the challenge Portfolio Submission Applicant provides a reflective narrative describing how they have	ntly and why Control Program he infection prevention here (3) years including rected the evolution major challenge for ding action taken to Me major challenge for ding action taken to Me major challenge for ding action taken to Me Me Me Me Me Me Me Me Me M	Applicant identifies how the specific area of need was identified	O Met	O Not met
Applicant identifies what they would do differently and what larrative 3: Evolution of the Infection 5 eve 12 in Control Proceed applicant provides a detailed a count of 1 state infection prevention and control program has 6 plve love, the past three (3) years including the role of 10 m al. 20 on a and cultural imperatives Tican describes the extent to which they directed the evolution Applicant identifies their perception of the next major challenge for infection prevention and control programs including action taken to prepare for the challenge Portfolio Submission Applicant provides a reflective narrative describing how they have	methy and why Control Program The infection prevention (hree (3) years including (a) Method (3) years including (b) Method (4) years including (b) Method (5) years including (b) Method (5) years including (b) Method (5) years including (c) Method (5) years including (c) Method (6) years including (c) years including (c) Method (6) years including (c)	Applicant identifies what they hoped to achieved as a result of the activities	O Met	(Ivot me
Applicant provides a detailed a coun of the infection prevention and control program has a plue to over the past three (3) years including the role of the unit al., along and cultural imperatives Applicant describes the extent to which they directed the evolution Applicant identifies their perception of the next major challenge for infection prevention and control programs including action taken to prepare for the challenge Portfolio Submission Applicant provides a reflective narrative describing how they have	receive of the control Program The infection prevention Three (3) years including Three (4) years including Three (4) years including Three (4) years including Three (4) years including Three (5) yea	Applicant identifies how the success was evaluated	CMS) Not met
Applicant provides a detailed a connoft on the infection prevention and control program has a blve love, the past three (3) years including the role of partial. Applicant al., along an cand cultural imperatives Applicant identifies the extent to which they directed the evolution Applicant identifies their perception of the next major challenge for infection prevention and control programs including action taken to prepare for the challenge Portfolio Submission Applicant provides a reflective narrative describing how they have	ne infection prevention where (3) years including eratives rected the evolution Me major challenge for eding action taken to Me ng how they have ntion and control in the Me sisted them to maintain	Applicant identifies what they would do differently and wh	Met	O Not met
and control program has a blve, over the past three (3) years including the role of pair al. A control cand cultural imperatives Circan describes the extent to which they directed the evolution Applicant identifies their perception of the next major challenge for infection prevention and control programs including action taken to prepare for the challenge Portfolio Submission Applicant provides a reflective narrative describing how they have	chree (3) years including	larrative 3: Evolution of the Infection Deve 😥 n 🕝 Control Pr	ogram	
Applicant identifies their perception of the next major challenge for infection prevention and control programs including action taken to prepare for the challenge Portfolio Submission Applicant provides a reflective narrative describing how they have	major challenge for iding action taken to Me mg how they have ention and control in the Me writies demonstrating Me Sisted them to maintain	and control program has explice over the past three (3) years including	O Met	O Not met
infection prevention and control programs including action taken to prepare for the challenge Portfolio Submission Applicant provides a reflective narrative describing how they have	ng how they have ntion and control in the Me	Cicar describes the extent to which they directed the evolution	O Met	O Not met
Applicant provides a reflective narrative describing how they have	ntion and control in the Me Me Me Me Me Me Me Me Me	infection prevention and control programs including action taken to	O Met	O Not met
	ntion and control in the Me Me Me Me Me Me Me Me Me	ortfolio Submission		
contributed to the profession of infection prevention and control in the past three (3) years	sisted them to maintain	contributed to the profession of infection prevention and control in the	O Met	O Not met
Applicant describes a range of appropriate activities demonstrating contribution to the profession	sisted them to maintain		O Met	O Not met
Applicant discusses how these activities have assisted them to maintain their skills at expert level			O Met	O Not met
ssessors Notes:		ssessors Notes:		
		CP-Expert Credentialling recommended?	O Yes	O No
ICP-Expert Credentialling recommended? (○ Yes	efer to full Committee?	O Yes	O No









CICP-PRIMARY APPLICATION CHECKLIST

Use this checklist to ensure you have completed all components before submitting your application.

- 1. Current curriculum vitae (CV) including certified copies of qualifications and registration (where applicable) have been provided. This includes:
 - · ACIPC Foundations of Infection Prevention and Control Course, or equivalent as approved by ACIPC
 - · ACSQHC Infection Control modules
 - · One of the Hand Hygiene Australia modules
- DSES ONLY 2. CV reflects that you have practised in infection can be a second or secon
 - ve completed the educational requirements associated with the level of a) CV reflects you h credenti

Peer eviewer has been:

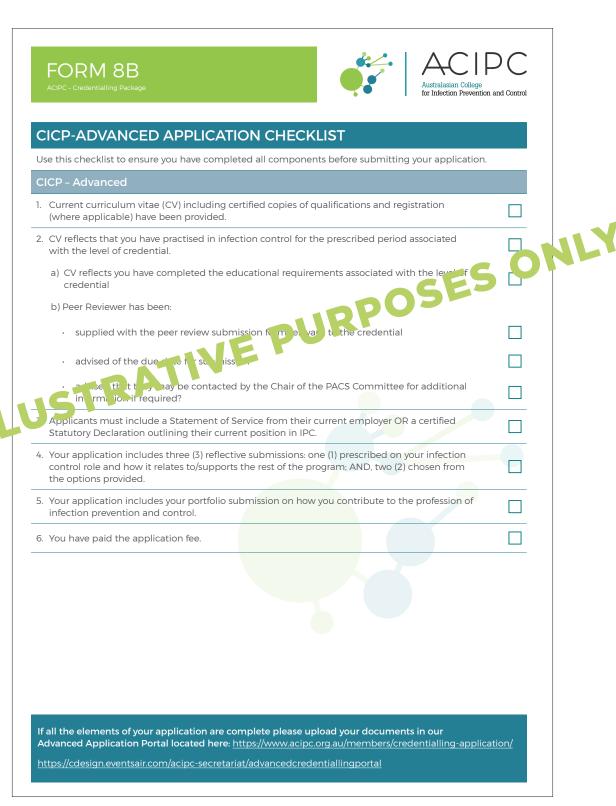
with the level of credential.

- · supplied with the peer review submission form relevant to the credential
- advised of the due date for submission
- advised that they may be contacted by the Chair of the PACS Committee for additional information if required?
- 3. Applicants must include a Statement of Service from their current employer OR a certified Statutory Declaration outlining their current position in IPC.
- 4. Your application includes the prescribed reflective submission on your infection control role over the past twelve (12) months.
- 5. Your application includes your portfolio submission on one of the reflective narrative topics
- 6. You have paid the application fee.

If all the elements of your application are complete please upload your documents in our Primary Application Portal located here: https://www.acipc.org.au/members/credentialling-application/

https://cdesign.eventsair.com/acipc-secretariat/primarycredentallingportal

PART 2 Applicant Forms











CICP-EXPERT APPLICATION CHECKLIST

Use this checklist to ensure you have completed all components before submitting your application.

1.	Current curriculum vitae (CV) including certified copies of qualifications and registration (where applicable) have been provided.	
2.	CV reflects that you have practised in infection control for the prescribed period associated with the level of credential.	B
	a) CV reflects you have completed the educational requirements associated with the crocked credential	
	b) Peer Reviewer has been: supplied with the peer review submission is represent to the credential	
	advised of the duta, ite air sugnission	
1	vise that lies may be contacted by the Chair of the PACS Committee for additional in Irmution if required?	
).	Applicants must include a Statement of Service from their current employer OR a certified Statutory Declaration outlining their current position in IPC.	
4.	Your application includes three (3) reflective submissions as prescribed.	

5. Your application includes your portfolio submission on how you contribute to the profession of

infection prevention and control and maintain your skills at the expert level.

6. You have paid the application fee.

If all the elements of your application are complete please upload your documents in our Expert Application Portal located here: https://www.acipc.org.au/members/credentialling-application/

 $\underline{https:/\!/cdesign.eventsair.com/acipc-secretariat/\!expertcredentialling portal}$



Level 6 152 Macquarie St Hobart TAS 7000

+61 (3) 6281 9239 office@acipc.org.au www.acipc.org.au

ABN 61 154 341 036